

July 20, 2009

The Honorable Christopher Murphy
United States House of Representatives
412 Cannon House Office Building
Washington, D.C. 20515

Dear Representative Murphy:

We, the undersigned organizations and individuals, write to share our support and appreciation for your amendment to the “America’s Affordable Health Choices Act” (H.R. 3200) to ensure continued Medicaid benefits for youth and young adults transitioning from secure detention back to the community.

Each year approximately 100,000 young people exit secure confinement and return to neighborhoods marked by poverty, dysfunctional home lives, and elevated area crime rates. Considering that recidivism rates are as high as 70% in some localities, much greater attention is needed to youth who exit secure confinement to ensure they are given the best possible chance at leading a delinquency-free life back in the community.

Youth in detention frequently suffer from mental health disorders. In fact, more than half of youth in detention report suffering from major depression and almost two-thirds report suffering from anxiety. Approximately two-thirds acknowledge regular drug use. And 66% of boys and 74% of girls in the juvenile justice system meet the criteria for at least one mental disorder, according to a recent epidemiological study of psychiatric illness prevalence among youth in detention. Most youth will require, at a minimum, adequate medical health care, while others will need focused mental health or substance abuse treatment.

Significant numbers of youth in secure confinement are enrolled in Medicaid upon admission to detention, but are terminated from the Medicaid program while they are incarcerated. Termination of Medicaid benefits often occurs for youth despite a call to state Medicaid departments from the Centers for Medicare and Medicaid Services to temporarily suspend—rather than terminate—these enrollments.

When Medicaid enrollment is terminated, youth may typically wait 90 days to for it to be reinstated. This presents a critical gap in services for this population. Many of these low-income youth need medications and services which are only accessible to this population through Medicaid.

Youth transitioning from secure confinement should not encounter roadblocks to receiving medical care, counseling, or assessment when returning to their communities. Instead, seamless access to medical, mental health, and substance abuse treatment and services is critical to achieving positive outcomes for youth and improved public safety for the community. Congress recently underscored the importance of successful reintegration of individuals back into their communities by passing the Second Chance Act (Public Law 110- 199). This momentum for reentry should not be undermined by delays in health insurance benefits to low-income youth exiting detention.

Your amendment protects access to treatment, assessment, medical care, substance abuse treatment, and mental health counseling during the critical time when youth are returning from secure confinement to their families and community life.

We thank you for your leadership and encourage members of the Committee to vote in favor of this amendment. If you have any questions please contact Ashley Nellis, Co-Chair of the Youth Reentry Task Force, at anellis@sentencingproject.org.

Sincerely,

National Organizations

AdvoCare, Inc.

American Civil Liberties Union

American Humane Association

American Psychiatric Association

American Psychological Association

Bazelon Center for Mental Health Law

Center for Children's Law and Policy

Children's Action Alliance

Children's Campaign, Inc.

Coalition for Juvenile Justice

Community Action Partnership

Corporation for Supportive Housing

Expression Art and Outreach Ministries

FedCURE

First Focus

Inner Voices

International Community Corrections Association

Mental Health America

Mentoring Today

National African American Drug Policy Coalition, Inc.

National Association of School Psychologists

National Association to End Homelessness

National Campaign for Youth Justice

National Center for Youth Law

National Juvenile Justice Network

National Council for Community Behavioral Health Care

National Parent Teacher Association

Public Justice Center

Rebecca Project for Human Rights

School Social Work Association of America

The Children and Family Justice Center, Northwestern Law School Bluhm Clinic

The Fortune Society, David Rothenberg Center for Public Policy

The Legal Aid Society

The Sentencing Project

Treatment Alternatives for Safe Communities

United Church of Christ/Justice and Witness Ministries
Voices for America's Children
Westcare Foundation
Youth Law Center
Youth Represent

State-Based Organizations

Action for Children North Carolina
Citizens Committee for the Children of New York
Connecticut Juvenile Justice Alliance
Iowa Coalition to Oppose Life without the Possibility of Parole for Children
Juvenile Justice Coalition of Ohio
Juvenile Justice Project of Louisiana
Juvenile Justice Project of the Correctional Association of New York
Maryland CURE
Prison Ministry Task Force, Diocese of Maryland
Shoulders to Lean On, Inc.
South Carolina Reentry Initiative
Voices for Ohio's Children

Individuals

Jeffrey Ian Ross, Ph.D., University of Baltimore
Sheila Montgomery, Portland Community College